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| Substitute for form 1449A/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i> | | Complete if Known | | | |
| | | Application Number | 09/930,445 | | |
| | | Filing Date | August 16, 2001 | | |
| | | First Named Inventor | Griswold, Timothy J. | | |
| | | Art Unit | 2176 | | |
| | | Examiner Name | Ries, Laurie Anne | | |
| Sheet | 1 | of | 2 | Attorney Docket Number | 026970-012100US |

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| | | Country Code ³ | Number ⁴ | Kind Code ⁵ (if known) | | | | |
| | | | | | | | | <input type="checkbox"/> |
| | | | | | | | | <input type="checkbox"/> |

ALL REFERENCES CONSIDERED EXCEPT WHERE LINED THROUGH. /L.R./

| | | | |
|--------------------|---------------|-----------------|------------|
| Examiner Signature | /Laurie Ries/ | Date Considered | 01/15/2009 |
|--------------------|---------------|-----------------|------------|

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹ Applicant's unique citation designation number (optional). ² Kind Codes of U.S. Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

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| Substitute for form 1449B/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i> | | | | Complete if Known | |
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| | | | | First Named Inventor | Griswold, Timothy J. |
| | | | | Art Unit | 2176 |
| Examiner Name | Ries, Laurie Anne | | | | |
| Sheet | 2 | of | 2 | Attorney Docket Number | 026970-012100US |

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ALL REFERENCES CONSIDERED EXCEPT WHERE LINED THROUGH. /L.R./

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| Examiner Signature | /Laurie Ries/ | Date Considered | 01/15/2009 |
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¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.